

10-18-88

SHIPPER 19069

Department of Health Services  
Toxic Substances Control Division  
Sacramento, California

**UNIFORM HAZARDOUS  
WASTE MANIFEST**

1. Generator's US EPA ID No.

CAD 009 684 440

Manifest  
Document No.

2. Page 1  
of 1

Information in the shaded areas  
is not required by Federal law.

3. Generator's Name and Mailing Address

PACIFIC BELL

2600 CAMINO RAMON, RM 2E050., SAN RAMON, CA 94583

A. State Manifest Document Number

87119266

B. State Generator's ID

H/A/H/Q/3/6/0/1/0/1/9/9/

C. State Transporter's ID

904880

D. Transporter's Phone (213) 698-0991

E. State Transporter's ID

F. Transporter's Phone

G. State Facility's ID

CAD10412245001

H. Facility's Phone

(213) 698-0991

4. Generator's Phone (818) 578-3115

5. Transporter 1 Company Name

OMEGA RECOVERY SERVICES

6. US EPA ID Number

CAD 042 245 001

7. Transporter 2 Company Name

8. US EPA ID Number

9. Designated Facility Name and Site Address

OMEGA RECOVERY SERVICES

12504 E. WHITTIER BLVD

WHITTIER, CA 90602

10. US EPA ID Number

CAD 042 245 001

11. US DOT Description (including Proper Shipping Name, Hazard Class, and ID Number)

a. WASTE FLAMMABLE LIQUID N.O.S UN 1993  
(WASTE OIL) FLAMMABLE LIQUID

12. Containers  
No. Type

001 DM

13. Total  
Quantity

20055 G

14. Unit  
Wt/Vol

State

EPA/Other

b. SPENT REFRIGERANT GAS N.O.S UN 1078  
NON FLAMMABLE GAS

005 CY

00600

State

EPA/Other

c.

State

EPA/Other

d.

State

EPA/Other

j. Additional Descriptions for Materials Listed Above

k. Handling Codes for Wastes Listed Above

a. 01 b. 01

c. d.

15. Special Handling Instructions and Additional Information

SITE ADDRESS: 102 N. STORMEYAN AVE  
ALHAMBRA, CALIF 91801

16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national government regulations.

If I am a large quantity generator, I certify that I have a program in place to reduce the volume and toxicity of waste generated to the degree I have determined to be economically practicable and that I have selected the practicable method of treatment, storage, or disposal currently available to me which minimizes the present and future threat to human health and the environment; OR, if I am a small quantity generator, I have made a good faith effort to minimize my waste generation and select the best waste management method that is available to me and that I can afford.

Printed/Typed Name

R. RENDON

Signature

R. Rendon

Month Day Year

11/02/88

17. Transporter 1 Acknowledgement of Receipt of Materials

Printed/Typed Name

Robert J CIRINGOLI

Signature

Robert J Ciringoli

Month Day Year

11/02/88

18. Transporter 2 Acknowledgement of Receipt of Materials

Printed/Typed Name

Signature

Month Day Year

19. Discrepancy Indication Space

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Printed/Typed Name

FRANK FORD

Signature

Frank Ford

Month Day Year

11/02/88

IN CASE OF AN EMERGENCY OR SPILL, CALL THE NATIONAL RESPONSE CENTER 1-800-424-6802; WITHIN CALIFORNIA CALL 1-800-852-7550